

# **2011 FOR PROFIT CORPORATION ANNUAL REPORT**

DOCUMENT# L96702

**FILED**  
**Jan 19, 2011**  
**Secretary of State**

**Entity Name:** MARILYN'S FIRST CORPORATION

**Current Principal Place of Business:**

1396 SW 160TH AVENUE  
SUNRISE, FL 33326 US

**New Principal Place of Business:**

**Current Mailing Address:**

1396 SW 160TH AVENUE  
SUNRISE, FL 33326 US

**New Mailing Address:**

**FEI Number:** 65-0216671

**FEI Number Applied For ( )**

**FEI Number Not Applicable ( )**

**Certificate of Status Desired ( )**

**Name and Address of Current Registered Agent:**

MOVITZ, MARILYN  
1396 SW 160TH AVENUE  
SUNRISE, FL 33326 US

**Name and Address of New Registered Agent:**

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE:

\_\_\_\_\_  
Electronic Signature of Registered Agent

\_\_\_\_\_  
Date

**OFFICERS AND DIRECTORS:**

Title: PST  
Name: MOVITZ, MARILYN  
Address: 1396 SW 160TH AVENUE  
City-St-Zip: SUNRISE, FL 33326

Title: V  
Name: MOVITZ, MICHELLE  
Address: 1396 SW 160 AVE  
City-St-Zip: SUNRISE, FL 33326

I hereby certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 607, Florida Statutes; and that my name appears above, or on an attachment with all other like empowered.

SIGNATURE: MICHELLE MOVITZ

VP

01/19/2011

\_\_\_\_\_  
Electronic Signature of Signing Officer or Director

\_\_\_\_\_  
Date